

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Docket Number

10/574,939

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|---|--|
| U.S. NATIONAL STAGE FEES | | |
| BASIC FEE | SMALL ENT. = \$ 150 | LARGE ENT. = \$ 300 |
| EXAMINATION FEE | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100 | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE | U.S. is ISA = \$ 50 / \$ 100 All other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS. | minus 100 = | 150 = |
| TOTAL CHARGEABLE CLAIMS | 5 minus 20 = | |
| INDEPENDENT CLAIMS | 1 minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE | OTHER THAN SMALL ENTITY |
|-------------------|------------------------------|
| RATE | Fee |
| BASIC FEE | |
| EXAM. FEE | |
| SEARCH FEE | |
| X \$ 125 = | |
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL | <input type="checkbox"/> 900 |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|----------------------------------|------------------------------------|
| AMENDMENT A | 4/7/6 | CLAIMS REMAINING AFTER AMENDMENT | |
| | | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | 5 | Minus | 20 = |
| Independent | 1 | Minus | 3 = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|------------------|--------------------------|
| RATE | ADDITIONAL FEE |
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDIT. FEE | <input type="checkbox"/> |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|------------------------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| | | | PRESENT EXTRA |
| Total | 5 | Minus | 20 = |
| Independent | 1 | Minus | 3 = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|------------------|--------------------------|
| RATE | ADDITIONAL FEE |
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDIT. FEE | <input type="checkbox"/> |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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